Perceptions of Rural Primary Care Providers in Caring for Infants Exposed to Opioids in Utero: A Qualitative Study

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Perceptions of Rural Primary Care Providers in Caring for Infants Exposed to Opioids in Utero: A Qualitative Study

Central Vermont Medical Center Pediatric Primary Care

Longitudinal Integrated Clerkship

Adessa Morano, MS3

Advisors:
Dr. Molly Rideout, MD
Dr. Anna Hankins, MD
Pediatric Primary Care for Opioid-Exposed Infants

- Vermont has some of the highest rates of substance use throughout pregnancy in the country.
- Improving Care for Opioid-exposed Newborns (ICON)
  - Vermont Department of Health and The University of Vermont Children's Hospital
  - Educational sessions on recommendations and guidelines to health care professionals
  - Address healthcare gaps through quality improvement initiatives, focused on enhanced care processes
- This CHP was a quality improvement project for ICON focusing on pediatric primary care at CVMC for opioid-exposed infants
Public Health Cost

• Vermont has the second highest rate of admissions to state-funded substance abuse treatment programs in the U.S
• Pregnant women are a critical population of adults dependent on opioids
• The rate of newborns diagnosed as exposed to opioids in Vermont has increased statistically significantly
  • Partially explained by increases in provider awareness and access to treatment
• Limited information on the costs and outcomes associated with pediatric primary care for OEI
Community Perspective

• “Pediatricians need to be extremely informed, flexible in their thinking, and actively monitoring their young patient who have been exposed to opioids in utero. Issues of equity in care and care for the whole family are incredibly important” - Katherine Wohlers, Early Childhood Educator

• “I wish there was more that we could do during pregnancy to support these future kids. Studying the effects of opioid exposure in utero is important so maybe down the road it can help us to develop new ways of intervening to prevent adverse outcomes.” - Philippa Owens, LICSW
Intervention and Methodology

• Qualitative Interviews of pediatric primary care providers at CVMC
• 10-20 min in length, 10 open-ended questions
• Questions based on literature review
• Interviews recorded and de-identified
• Two readers independently worked on thematic coding
  • Verified themes: primary and secondary
• Six core themes identified in interviews
• Identified targeted areas of improvement based on these outcomes
Results

Core themes:
1. Important to build good relationships with open and positive communication with parents of OEI
2. Judgement of parents of OEI causes mistrust and in turn negatively affects care of infants
3. Need better communication with team in general, especially with OB providers and providers outside of CVMC
4. CHT (Jen and former opioid-focused CHT role) is incredibly helpful
5. Need more training on both trauma and opioid exposure in utero
6. Plan of safe care not helpful and staff have little/no training on it
Effectiveness of Project and Limitations

- Qualitative research was an effective initial step in evaluating pediatric primary care of OEI
  - Clear themes emerged
  - Identified areas of strength, improvement, and reflection

- “Limitation”
  - One outpatient office
Recommendations for future interventions and projects

• Action Items
  • Improve communication, especially with OB providers
  • Training in trauma-informed care
  • Training in exposure to opioids in utero
  • Training and systems-based review for Plan of Safe Care document effectiveness
  • If possible, renew funding for former opioid-focused CHT role

• Future Interventions
  • Evaluate patient perspective on communication with providers
    • Provide information on communication training


Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work. The interviewer affirms that he/she has explained the nature and purpose of this project. The interviewee affirms that he/she has consented to this interview.

Consented: YES

Name: Philippa Owens, LICSW

Name: Katherine Wohlers, Early Childhood Educator